

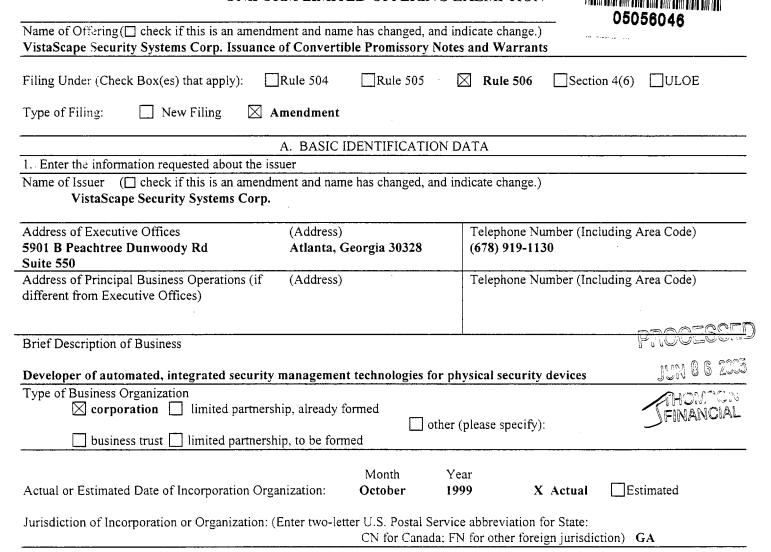
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## FORM D

[OMB Number: 3235-0076, Expires: November 30, 2001] U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) McGonnigle. Glenn Business or Residence Address (Number and Street, City, State, Zip Code) 5901 B Peachtree Dunwoody Rd., Suite 550, Atlanta, Georgia 30328 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Shiveley, Jav Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Bayhill Drive, Suite 300, San Bruno, CA 94066 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Santillan, Mauricio Business or Residence Address (Number and Street, City, State, Zip Code) 20801 Biscayne Boulevard, Suite 403, Aventura, Florida 33180 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Sturgis, Fred Business or Residence Address (Number and Street, City, State, Zip Code) 950 E. Paces Ferry Road, Atlanta, Georgia 30326 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Manager Full Name (Last name first, if individual) Chaddick, Steve Business or Residence Address (Number and Street, City, State, Zip Code) 5901 B Peachtree Dunwoody Rd., Suite 550, Atlanta, Georgia 30328 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) McNeight, Tom Business or Residence Address (Number and Street, City, State, Zip Code)

5901 B Peachtree Dunwoody Rd., Suite 550, Atlanta, Georgia 30328

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner
Full Name (Last name first, if individual)
Caisse De Depot Et Placement Du Quebec
Business or Residence Address (Number and Street, City, State, Zip Code)
Centre CY Capital, 1000 Place Jean-Paul Riopelle, Montreal, Quebec H2L 2B3
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Visionaria Venture Capital LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
20801 Biscayne Boulevard, Suite 403, Aventura, Florida 33180
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Paladin Homeland Security Fund, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)  2001 Pennsylvania Avenue, NW, Suite 400, Washington, D.C., 20006
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner  Full Name (Last name first, if individual)
HIG VistaScape, Inc.
Business or Residence Address (Number and Street, City, State, Zip Code)  1001 Brickell Bay Drive, 27 <sup>th</sup> Floor, Miami, Florida 33131

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. I	NFORMA	TION AB	OUT OFF	ERING				
1.	Has the is	ssuer sold, or o	does the issu	ier intend 1	to sell, to n	on-accredi	ted investo	rs in this o	ffering?	••••••	Ye	s No
			A	nswer also	in Append	dix, Colum	n 2, if filin	g under UI	LOE.			
2.	What is t	he minimum i	nvestment th	nat will be	accepted fi	om any in	dividual?	***************************************		•••••	••••	N/A
3.	Does the	offering perm	it joint own	ership of a	single unit	?					Ye	
	indirectly sales of s dealer re- more than forth the l Name (L	information row, any commisse ecurities in the gistered with the five (5) personnermation for ast name first,	sion or simil e offering. I he SEC and/ ons to be list or that broke if individua	lar remune If a person /or with a s ted are ass or or dealer	ration for s to be listed state or stat ociated per only.	olicitation I is an asso es, list the esons of suc	of purchas ciated pers name of th ch a broker	ers in conr on or agen e broker o	ection with t of a brok dealer. If	er or		
Bus	siness or R	esidence Addı	ress (Numbe	er and Stre	et, City, Sta	ate, Zip Co	de)					
Nar	ne of Asso	ociated Broker	or Dealer									
Stat	tes in Whi	ch Person List	ed Has Soli	cited or Int	ends to So	licit Purch	asers	<del></del> _	·	<u></u>	·	<del> </del>
	(Check "	All States" or	check indivi	idual State	s)	••••••					🗆	All States
[AL	L] [A]	K] [AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]			[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]			[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[HO] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [W (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROC	EEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u>-0-</u>	\$ <u>-0-</u>
	Equity	\$ <u>-0-</u>	\$ <u>-0-</u>
	Common Preferred		
	Convertible Securities (including warrants)	<u>\$2,400,000</u>	\$2,400,000
	Partnership Interests	\$ <u>-0-</u>	\$ <u>-0-</u>
	Other (Specify)	\$ <u>-0-</u>	\$ <u>-0-</u>
	Total	\$ <u>2,400,000</u>	\$2,400,000
	their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>5</u>	\$ <u>2,400,000</u>
	Non-accredited Investors	<u>-0-</u>	<u>-0-</u>
	Total (for filings under Rule 504 only)	<u>N/A</u>	<u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504, or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	<u>N/A</u> <u>N/A</u> <u>N/A</u>	\$ <u>-0-</u> \$ <u>-0-</u> \$ <u>-0-</u>
	Total	<u>N/A</u>	\$ <u>-0-</u>

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

lely to organization expenses of the issuer. The information may be given subject to future contingencies. If the amount of an expenditure is not		
Transfer Agent's Fees		\$ <u>-0-</u>
Printing and Engraving Costs		\$-0-
Legal Fees	$\boxtimes$	\$30,000
Accounting Fees	$\boxtimes$	\$ <u>0</u>
Engineering Fees		\$ <u>-0-</u>
Sales Commissions (specify finders' fees separately)		\$ <u>-0-</u>
Other Expenses (blue sky filing fees)	$\boxtimes$	\$ <u>0</u>
Total	$\boxtimes$	<u>\$30,000</u>
response to Part C - Question 1 and total expenses furnished in sponse to Part C - Question 4.a. This difference is the "adjusted"	•	\$2,370,000
	stribution of the securities in this offering. Exclude amounts relating lely to organization expenses of the issuer. The information may be given subject to future contingencies. If the amount of an expenditure is not own, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	stribution of the securities in this offering. Exclude amounts relating lely to organization expenses of the issuer. The information may be given subject to future contingencies. If the amount of an expenditure is not own, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Payments to Officers, Directors & Payments To Affiliates Others Salaries and fees. \$ -0-\$-0-Purchase of real estate \$-0-\$-0-Purchase, rental or leasing and installation of machinery and equipment...... \$<u>-0-</u> \$<u>-0-</u> Construction or leasing of plant buildings and facilities ..... \$-0-\$-0-Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)...... \$<u>-0-</u> \$<u>-0-</u> Repayment of indebtedness. \$ -0- $\boxtimes$ \$ -0-Working capital..... $\boxtimes$ \$-0-\$2,370,000 Other (specify) \$-0-\$-0-Column Totals ..... $\boxtimes$ \$\_-0-\$2,370,000 Total Payments Listed (column totals added)..... $\boxtimes$ \$2,370,000

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
VistaScape Security Systems Corp.	Johnst	5-23-05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Jon VerSteeg	Vice President of Finance	

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

_	E. STAT	TE SIGNATURE				
1.	Is any party described in 17 CFR 230.262 presently subject provisions of such rule?		Yes <b>No</b>			
	See Appendix, Co	olumn 5, for state response.				
2.	The undersigned issuer hereby undertakes to furnish to any Form D (17 CFR 239,500) at such times as required by star		ice is filed, a notice on			
3.	The undersigned issuer hereby undertakes to furnish to the issuer to offerees.	state administrators, upon written request, inform	nation furnished by the			
4.	The undersigned issuer represents that the issuer is familian Limited Offering Exemption (ULOE) of the state in which availability of this exemption has the burden of establishing	this notice is filed and understands that the issuer				
	e issuer has read this notification and knows the contents to be dersigned duly authorized person.	pe true and has duly caused this notice to be signe	d on its behalf by the			
Iss	uer (Print or Type)	Signature	Date			
Vis	staScape Security Systems Corp.	Jun87	5-23-05			
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Joi	n VerSteeg	Vice President of Finance				

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# FORM D

# APPENDIX

1	2		3		4	· · · · · · · · · · · · · · · · · · ·			5	
	to n	dited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Convertible Promissory Notes and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		X	\$28,874	1	28,874	0	0			
CO										
CT										
DE										
DC		X	\$1,428,781	1	\$1,428,781	0	0			
FL		X	\$840,000	1	\$840,000	0	0			
GA										
HI										
ID										
IL										
IN										
ΙA										
KS										
KY										
LA			·							
ME										
MD										
MA										
MI										
MN										
MS										
МО										

				APPEN	DIX				
1		2	3 4						5
•	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	·	Type of in amount purch	vestor and ased in State		Disqual under UL if yes, explan waiver	ification State OE attach attion of granted) -Item 1)
State			Convertible Promissory Notes and Warrants		Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									
NM									
NY		X	\$82,814	1	\$82,814	0	0		1
NC									
ND							-		
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA				:					
WV									
WI									
WY									
Cay Isle		X	\$19,531	1	\$19,531	0	0		